REOD B.D.O. FORM D 2006 1086

UNITED STATE SECURITIES AND EXCHANGE Washington, D.C. 1



06046537

imber:

April 30,2008

ed average burden Inquisperresponse.....16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

FORM D

| SEC | SEC USE ONLY | | | | | | | | | |
|--------|--------------|--------|--|--|--|--|--|--|--|--|
| Profix | | Sector | | | | | | | | |
| | | | | | | | | | | |
| OΛ | TE RECEIV | מפ | | | | | | | | |
| | | | | | | | | | | |

| Name of Offering A check if this is an amendment and name has changed, and indicate change.) Georgetown Resources, LLC | |
|--|--|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | N ULGE REC"D S.E.C. |
| A. BASIC IDENTIFICATION DATA | SEP - 5 2006 |
| 1. Enter the information requested about the issuer | .3EF 2000 |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | .076 |
| Georgetown Resources, LLC | \$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 1140 N.W. 63rd Street, Suite 300 West, Oklahoma City, OK 73116 | 405-843-9001 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| (if different from Executive Offices) | |
| Brief Description of Business | 0 2116 |
| oil & gas drilling and operations | |
| the second secon | |
| | NG AL please specify): |
| business trust limited partnership, to be formed limited | ed liability company |
| Mouth Year Actual or Estimated Date of Incorporation or Organization: 014 013 X Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat CN for Canada; FN for other foreign jurisdiction) | |

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation Dor Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

· ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

| | 77 SESS 08 SESSENCE OF SESSENCE | | | | | | | | |
|----------|---------------------------------|--------------------|--|--|--|---|--|--|--|
| | Participation of the second | | | BASIC IDENT | IFICATION DATA | 1000 | is de la company | 1 | Supplied the supplied of the s |
| 2. | Enter the information r | • | • | | | | | | |
| | • | | | ** | the past five years; | | | | |
| | | | | | | | | | is of equity securities of the issuer. |
| | | | • | • | orate general and ma | naging | pariners of | partne | ership issuers; and |
| | Each general and i | nanaging partner o | t pannership is | secis. | | *************************************** | ···· | | |
| Ch | eck Box(es) that Apply: | X Promoter | Benefic | al Owner | Executive Officer | | Director | X | General and/or Managing Partner |
| Ful | l Name (Last name first, | if individual) | - membershalor (name processor) are arrivative continues; and | OMERICA AREA DO CHEMICO CHECACO CON CONTROL CO | elektrististististi (1900) kaikin kalinesta oli kalinesta kalinesta (1900) kalinesta kalinesta (1900) kalinest | 54 %C 1850 F F0 100 C GARD | COCCOMENT MERCONICE - CALCUMANY, AND | ky sicheenikenograpoo | estata international description de la contrata del contrata del contrata de la contrata del la contrata de la contrata del la contrata de la |
| , C | harles D. Morrison | | | | | | | | |
| Bu | siness or Residence Addro | ess (Numberand | Street, City, St | ate, Zip Code) | | and the second second | | - CALCARDO - CALCARDO - CA | en de la company de la com La company de la company d |
| 11 | 40 N.W. 63rd Street, | Suite 300 West | Oklahoma | City, OK 731 | 16 | | *************************************** | | |
| Ch | eck Box(es) that Apply: | ☐ Promoter | ☐ Benefici | al Owner 🔲 | Executive Officer | | Director | | General and/or Managing Partner |
| Ful | l Name (Last name first, | if individual) | realizações citaciorprodució respirantismos copi | argani-risgas <mark>arrasines despirituació</mark> n y Suspeciación d | d o ritarional tra- la concentrata par recommensor e construir specialista conspensação, | one menser can | tileriniae di tanàna di mandra di tanàna | n de regiones (de la constitución de la constitució | etti on internitritarin aspaintaataan taansis on etsiaatijis iljääsistääjänästiente enginsisse mujassississist |
| ,×24400 | | | a matagaran esta a sontaño esta a com esta esta esta esta esta esta esta esta | philipping of committees with a property of the committee | a transference interests interests and the contract of the con | onecresmo x quencom | 10070-5- 04000-5-60 00-2-600 | ······································ | programme and programme and the contraction of the |
| Bu | siness or Residence Addre | ess (Numberand | Street, City, St | ate, Zip Code) | | | | | |
| | | | | | | | | | |
| Cha | eck Box(es) that Apply: | Promoter | ∐ Benefici | al Owner | Executive Officer | Ц | Director | Ц | General and/or Managing Partner |
| Ful | l Name (Last name first, | if individual) | | | opporter ou a control de principio de de describir con que la describir de describir de servicio de la control | | **************** | (1000) Children (100) | andersoner sommer dent of the "Accessations" enclosement is sommercially sommercially supplying your play local country country country of the country of th |
| ,coences | | | namen menanananan menan | | | namataci amansan a | anti-communication and the second and | aanaa maanin ku maa kinga so | COMMUNICATION CONTRACTOR OF THE CONTRACTOR OF TH |
| Bu | siness or Residence Addre | iss (Numberana | ancei, Chy, ai | aic, Zip Coze) | | | | | |
| Ch | eck Box(es) that Apply: | Promoter | ☐ Benefici | ial Owner | Executive Officer | | Director | | General and/or Managing Partner |
| Ful | I Name (Last name first, | if individual) | engelet trebuseriesensense et substitute etc. Subst | ners ar ne s'estimant de l'estimant de l'estimant de l'estimant de l'estimant de l'estimant de l'estimant de l | erricania enizada internativa francisco porte esta da inconsistencia de inconsistencia de la consistencia de c | incord disclarge by the | rigent per admigrate describerations de | nicial e fenimies e ciacines | aranin'ny haivondrona amin'ny amin'ny aran'ny aran'ny |
| | | | | | | | | | |
| Bu | siness or Residence Addre | ess (Number and | Street, City, St | ate, Zip Code) | arapara decisionem misumación e consecutas actionalismos proprieses | 900-94 8 483185-3546-36 | and an interest of the second | ore occurrence e | (Continuer Espandación profesiones compressiones recipioses confesiones confesiones de Securios confesiones de |
| Ch | eck Box(es) that Apply: | Promoter | ☐ Benefic | ial Owner | Executive Officer | | Director | | General and/or Managing Partner |
| Ful | ll Name (Last name first, | if individual) | - coordinate in the "Heispiece declarate coordinate coo | ### (140-140-140-140-140-140-140-140-140-140- | economic (no const. in classificación (seconomic consecuent con i reconsectable se de cinema cidade escalación (| Meno-reasolidados catalil | acicolicy eradosacya tessoccusacusacus | try to a process description of the control of the | CONTROL POR CONTROL TO THE PROPERTY CONTROL TO CONTROL TO CONTROL CONT |
| Bu | siness or Residence Address | ess (Number and | Street, City, St | ate, Zip Code) | ulare pal-almentativa etaponeterim tattapa neo 4 martinativa internativa | in internet sense | on the same of | ara resuscientarios a | N PRESENT MATERIAL AND STATEMENT OF SEGMENT AND AND SERVE TO STATEMENT OF STATEMENT STATEMENT AND SERVE AND SE |
| Ch | eck Box(es) that Apply: | Promoter | ☐ Benefic | ial Owner | Executive Officer | | Director | | General and/or Managing Partner |
| Fu | Il Name (Last name first, | if individual) | chydifiagona-kaaddigeniagd hiddhild ciigolis Ari | jürjdesi keistimuudikpade dikunneenvassad kojandoong . | e gapa-alisenengen. Displomphisase Armini (ilinii) in inneperseen geste misir parmit | apain de Grezon IV nade | acy castility. Permissiplicify Pepasonejs v astr | re dendergementen fisjo | and Be a hadron miline announgel aller metalologic met a demonstrate de secretalistic distinuence havragers; con |
| Bu | siness or Residence Addr | ess (Number and | Street, City, St | ate, Zip Code) | abulgata urlagatifese biogogyalada incepsepolit baden besir urusenenin | enga magaganna arrow | садешеског жизексерек фадрац | grava tarayi visav ayant s | portojan e versioniko: ekopresione hossestelen velesti ilijan viteletoprejudi eksistiajan, intivutojaks: 1251a. cov |
| Ch | eck Box(es) that Apply: | Promoter | ☐ Benefic | ial Owner | Executive Officer | | Director | | General and/or Managing Partner |
| Fu | Il Name (Last name first, | if individual) | t ingeneration barrowing with a subministration with | опточно септеропення медопення состройня в | enterment gente von water introvers von von ontogen-consecution et verschieden. | Balle accessor of a | ок опута сометрив мещиствома | iii 4.000000,0100,000-00000 | octoria i triditaciano dei estatificaciantes: anter anteres commente commente qualquirio decentiquis de decentiquis de |

Business of Residence Address (Number and Street, City, State, Zip Code)

| | N. P. | | e e | | В. Г | SFORMATI | ION ABOU | T OFFERI | NG | 1 mg/m | 1000 | 146 146 | i jar |
|-----------------|------------|-------------------------------|---|----------------------------|--|--|--|--|--|--|--|---|--|
| | Hac the | i ecnar enld | , or does th | ıa icenar ir | dend to se | ll to non-o | ecredited i | ncoetare in | this offeri | no? | | Yes | No ron |
| ** | 1443 016 | | , or anea a | | | Appendix, | | | | ~ | *************************************** | Ц | X |
| 2. | What is | the minim | um investm | | | | | | | | ************ | \$ 80 | ,000 |
| - | | | | | | | | | | | | Yes | No |
| 3. | | * * | nermit joint | | • | | | | | | | X | |
| 4. | commis: | sion or simi on to be list | lar remune ed is an ass | ration for s ociated pe | olicitation rson or age | of purchase mt of a brok | ers in conne er or deale | ction with rregistered | sales of sec I with the S | orities in \emptyset EC and/or | irectly, any ne offering, with a state ons of such | | |
| | | | you may so | | | | | | | , | | | |
| Full | Name (I | ast name t | īrst, if indi | vidual) | | | | | | | | | |
| Bus | iness or l | Residence . | Address (N | umber and | Street, Ci | ly, State, Z | ip Code) | BBBOAN AN EARTH SCOTE A POOT NOT ABT A STABBANDERS | roadkiristaataatarii raskis aataa kankistaasi d | ett frindstradinalariaureur ex croconecimienteur es Aff | van verbendalle oder of express verbendendendendendende | | LEGILOLOGO COMPRESSES O SINGUISTO DE VISTA UN PRINCIPACIÓN PARA |
| Nan | ne of Ass | ociated Br | oker or Dea | ıler | | orași decritorit constituit decritori e e estructura de estructura de estructura de estructura de estructura d | anne de la companya d | | - geni d'anis komunen essenen en escripci desira en | station time to the state of th | nder school der de service de ser | | larinadar contrator no contrator |
| enologiaconauco | . 63.13 | * 1 * 5 | * | <i>*</i> • • • • | | 4 - 70 - 17 - 2 - 1 | | | and the second s | *************************************** | ···· | manacouchichicosox birrochis ^{bir} | ************************************** |
| Stat | | | Listed Has " or check | | | | | | | | | — 411 | States |
| | (Check | All States | OFCHOCK | muividuai | States) | * | ************* | • | *********** | ************ | . 4 * 2 ** * * 4 * 2 2 * 4 * 4 4 | | Janes |
| | 盔 | AK | AZ | AR | CA | <u>(CO)</u> | CT | DE | DC N | FL | GA | | |
| | MI | NE NE | IA NV | KS NH | KY NJ | LA NM | ME NY | MD NC | MA ND | MI OH | MN OK | MS OR | MO PA |
| | RI | sc | SD | | TX | UT | VT | VA. | WA | WV | WI | WY | PR |
| Full | Name (I | ast name t | lirst, if indi | vidual) | | | | | | | | *************************************** | |
| Bus | iness or | Residence | Address (N | kumber an | d Street, C | ity, State, 2 | Zip Code) | | <u></u> | | ************************************** | | |
| N. | na nE Aso | ociated De | oker or Dea | | and the second s | | aga ga ggadini ilikini ilikini meka ca ma kaci. | | aggarindiakirdindhakirdinak | | er er remende der son er remende der der der der der der der der der d | ···· | |
| 1 4411 | ne or maa | ociated ton | arei ui isei | B1 G1 | | | | | | | | | |
| Stat | es in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit I | Purchasers | ide i arno codo adino de circamate de deladeren | enganteti kalendarikati ili ili ili ili ili ili ili ili ili i | ragin Habilathuspassyonautusgystystystysiö | rtigi indirimteeir Menelitai enem perugassins | | riados preinse pos por haiste <u>para esta esta esta esta esta esta esta est</u> |
| | (Check | 'All States' | " or check | individual | States) | • X • • • • • X • X • • • • • • • • • • | | ************************** | ************* | *********** | ************ | | States |
| | AL. | AK | AZ | AR | CA | CO | CT | DE | DC] | FL | GA | H | ID |
| | II. | | IA | KS | KY | LA | ME | MD . | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | N | NM | NY | NC | ND | OH | <u>OK</u> | OR | PA |
| | RI | SC. | SD | TN | TX | (LT) | VT] | VA] | WA | WV | WI | WY | [PR] |
| Full | Name (I | ast name t | first, if indi | vidual) | | | | | | | | | |
| Bus | iness or | Residence | Address (N | Kumber an | d Street, C | ity, State, 2 | Zip Code) | ne service in a constructive de la | AND THE PROPERTY OF THE PROPER | ennementalen en e | | *************************************** | animikan manan ian mananan manan Mananan mananan manana |
| Nan | ne of Ass | ociated Br | oker or Dea | uler | y tropy (o | and the second s | le de la companya de | neel the efter the reason in the state of th | iggerigder Arabarida för blogbingsforing blogbing | e and the endedone and consequent | ottakiniyettiklika keelesi oo keesi radi aada kissii il | | estante de la constante de la constante de la cons tante de la constante de l |
| Stat | es in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit I | Purchasers | | | | | ····· | *************************************** |
| | (Check | "All States | " ar check | individual | States) | • > • + > 4 • N• > 4 • > • • × • > . • | +>4+X++++++++++++++++++++++++++++++++++ | 4 4 7 49 4 7 9 4 4 7 49 4 49 4 49 4 | | ************************************** | *********** | | l States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | H | 1D |
| | | | IA] | KS | KY | EA DE | ME | MD | MA | MI | MN | MS | MO |
| | MT RI | NE SC | NV SD | NH] | TX | NM UT | NY VT | NC VA | ND WA | OH WV | OK WI | OR WY | PA PR |
| | | | | | | | | | | | | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | | | |
|----|--|--|---|---|--|
| | Type of Security | Aggregate Offering Pri | | An | Sold |
| | Debt | 0 | | \$ | 0 |
| | Equity\$ | 0 | | \$ | 0 |
| | ☐ Common ☐ Preferred | | | | |
| | Convertible Securities (including warrants) | . 0 | | \$ | 0 |
| | Partnership Interests | , 0 | | S | 0 |
| | Other (Specify) | 0 | ************ | S | 320,000 |
| | Total | |) | \$ | 320,000 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | *************************************** | out the second s |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | | | Aggregate ollar Amount of Purchases |
| | Accredited Investors | 2 | *************************************** | S | 320,000 |
| | Non-accredited Investors | | *************************************** | \$ | 0 |
| | Total (for filings under Rule 504 only) | —На Меректория рабория составления поставления поставления поставления поставления поставления поставления пос | ; compresso | \$_ | |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | | | |
| | Type of Offering | Type of Security | | D | ollar Amount Sold |
| | Rule 505 | | - | \$ | racconstitute appropriate appr |
| | Regulation A | | | | |
| | Rule 504 | • | ******* | \$ | |
| | Total | | | \$ | |
| -4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | | |
| | Transfer Agent's Fees | **** ****** | X | \$ | 0 |
| | Printing and Engraving Costs | | X | \$ | 500 |
| | Legal Fees | ********** | X | \$ | 7,000 |
| | Accounting Fees | ********** | X | \$ | 0 |
| | Engineering Fees | ********** | X | \$ | 0 |
| | Sales Commissions (specify finders' fees separately) | ** * ** ** * * * * * | X | <u>s</u> | 0 |
| | Other Expenses (identify) Travel, Miscellaneous | | X | S | 7,500 |
| | Total | | X | \$ | 15,000 |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| S . | b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds. | | s | | \$ <u>7</u> | 85,000 |
|------------|--|---|--------------|---|-------------------|--|
| | each of the purposes shown. If the amount for a check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Par | of the payments listed must equal the adjusted gros | | | | |
| | | · | O Dir | rments to Micers, ectors, & Tiliates | | yments to Others |
| | Salaries and fees | *************************************** | X S_ | 0 | _ X \$_ | 15,000 |
| | Purchase of real estate | | X S | 0 | X \$_ | 0 |
| | Purchase, rental or leasing and installation of ma | | COI C | 0 | SOD C | 0 |
| | and equipment | | - | | _ XIS_ | 0 |
| | | | IXI ₂ | | _ 🗓 \$ | |
| | Acquisition of other businesses (including the va offering that may be used in exchange for the ass | | | | | |
| | issuer pursuant to a merger) | | X 5 | 0 | X S_ | 0 |
| | Repayment of indebtedness | | X \$ | 0 | X S_ | 0 |
| | Working capital | *************************************** | . 🛛 S | 0 | _ X \$_ | 120,000 |
| | Other (specify): Acquisition of oil properties | | X S_ | 0 | _ X S_ | 650,000 |
| | | | (2) | 0 | _ X \$_ | 0 |
| | | | | | | ~~~ |
| | Column Totals | | . 🛛 S | 0 | _ X s_ | 785,000 |
| | Total Payments Listed (column totals added) | | | ⊠ \$ | 785,000 | ······································ |
| | . Manimum particular distribution in the second sec | D. FEDERAL SIGNATURE | , Kinga | 41% | T SP Treating | a a |
| ign | ssuer has duly caused this notice to be signed by the ture constitutes an undertaking by the issuer to funformation furnished by the issuer to any non-acc | rnish to the U.S. Securities and Exchange Comm | ission, (| upon writt | | |
| SSU | er (Print or Type) | Signaly / | Date | | | |
| Ged | rgetown Resources, LLC | Marlo D. Mor | Augu | st 29, 200 |)6 | |
| | e of Signer (Print or Type) | Title of Signer (Print or Type) | | | | |
| Cha | rles D. Morrison | Manager | | | | |
| <u> </u> | | | | *************************************** | | |

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | E. STATE SIGNATURE | | | |
|----------|--|--|--------------------------------------|----------|--------------|
| . | Is any party described in 17 CFR 230,262 p provisions of such rule? | | | Yes | No X |
| | Sec | e Appendix, Column 5, for state resp | ionse. | | |
| 2. | The undersigned issuer hereby undertakes to D (17 CFR 239,500) at such times as required. | • | iny state in which this notice is fi | led a no | lice on Form |
| 3. | The undersigned issuer hereby undertakes to issuer to offerees. | o furnish to the state administrators, | upon written request, informati | on furn | ished by the |
| 4. | The undersigned issuer represents that the i limited Offering Exemption (ULOE) of the s of this exemption has the burden of establis | tate in which this notice is filed and | understands that the issuer clair | | |
| Theissu | er has read this notification and knows the cont | ents to be true and has duly caused th | is notice to be signed on its behal | f by the | un dersigned |
| | horized person. | Δ . | <i>y</i> | | |
| | Print or Type) | Signature / May | Date Assessed 20, 2006 | | |
| | etown Resources, LLC Print or Type) | Title (Print or Type) | August 29, 2006 | | |
| Charles | s D. Morrison | Manager | | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | | 2 | 3 | | | 4 | | 5 | |
|-------|---|--|---|---|--|--|---|---|--|
| | to non-a investor | to seli ecredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) Number of Number of | | | | ification ate ULOE attach ation of granted) Item 1) |
| State | Yes | No | Enter Security Name Here | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL. | | | | | | | | | |
| AK | | | | | | | | | |
| ΛZ | | | | | | | | | |
| ΛR | | *************************************** | | | | | | | |
| CA | | | | | | | | | |
| co | | | | | | | | | |
| CT | NA-CHICACKONCHINICHTHIA I AND | | | | | | | | |
| DE | | | | | | | | | *************************************** |
| DC | | | | | | | | | |
| FL. | gasuuususukkukkukkuusuus | | | Company or count while the reconstruction of the desire in the result count to be | and the construction was a supplied that the construction of the c | | Marita Maria Maria Antonio di Santa Antonio di Maria Antonio di Maria Antonio di Maria Antonio di Maria Antonio | *************************************** | ·************************************* |
| GA | | | | | | | | | |
| НІ | | | | | | *************************************** | | | |
| ar | | | | | | | | | |
| n. | | | | | | ' | : | | |
| IN | | | | | | | | | |
| ĪΛ | | | | | | | | | |
| KS | | | | | | | | | |
| KY | · ***************************** | ************************************ | converge consequence on constraints in the procedure of the first plan of the first | | *************************************** | | | | ~~~~ |
| LA | | | | | | | | | |
| ME | | | | | | kan ka ng kang makangan makangan kan kang kang kang kang kang kan | | | nggarnadaunu anugawa sunuanu sustan m |
| MD | | | | | | | | | |
| MA | | | | | *************************************** | | *************************************** | | |
| МІ | | | | | | | | | |
| MN | | | | | | | | | |
| MS | | | | | | | | | |

APPENDIX

| 1 | | 2 | 3 | | 4 | | | | | | |
|-------|---|---|--|--|---|--|--|---------|--|--|--|
| | to non-a investor | to self ceredited s in State | Type of security and aggregate offering price offered in state | | Type of amount pu | | under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | | |
| | (van B | -ltem 1) | (Part C-Item 1) | *************************************** | (ran | C-Item 2) Number of | energe en en | (rarre- | atem 1) | | |
| State | Yes | No | Enter Security Name Here | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | |
| мо | | X | \$800,000 | | | | | | Х | | |
| MT | | # # # # # # # # # # # # # # # # # # # | | | | | | | | | |
| NE | | | THE RESIDENCE OF THE PROPERTY | March and the second se | | | | | and the second of the second o | | |
| NV | M. Mariana (M. 1800) | | | | | • | | | **** | | |
| НИ | | | | | | | | | | | |
| ЦИ | | | CONTRACTOR OF THE CONTRACTOR O | | | | 10.00 40.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80.00 80 | | | | |
| NM | | | | | | | | | | | |
| NY | DEFENDENCE OF THE PARTY OF THE | | | | • | | | | 4444444 | | |
| NC | | | | and the state of t | | | · | | | | |
| ND | 41.154.01.00.20.00.00.00.00.00.00.00.00.00.00 | | | | | | | | | | |
| OH | | | | | | | | | | | |
| OK | | X | \$800,000 | 1 | \$160,000 | | | | х | | |
| OR | | E BOTTOMORPH A CHIMICAN ANT A GOTTOMORPHICAL CO. SAL. | | | Margar des reservir en des appearables company reservir portropor | Special control territories on primates (perpendication of territories on the perpendication of the perpendic | | | | | |
| PA | | | | | | | | | | | |
| RI | | | | | | | | | | | |
| SC | | | | | | | | | | | |
| SD | | | | | | | | | | | |
| TN | | | | | | | | | | | |
| TX | | X | \$800,000 | 1 | \$160,000 | | | | Х | | |
| UT | | | S. Samuel and the same and the | | <u> </u> | | | | | | |
| VT | | | | 1 | | | | | | | |
| VA | ************************************** | X | \$800,000 | | Santa on war an experience of the Material Co. | | graph and the second | | X | | |
| WA | | | | | | | | | | | |
| WV | | | | <u> </u> | | | baccincontrol 600 000 000 000 000 000 000 000 000 00 | | | | |
| WI | | *************************************** | | | | | | | | | |

| L. William was to drive, where w | | |
|----------------------------------|--|--|
| APPENDIX | | |
| | | |
| | | |
| | | |

| 1 | 2 3 4 | | | | | | 5 Disqualification | | |
|-------|----------------------|---|--|--------------------------------------|-----------|--|-----------------------|---|----------|
| | to non-a investor | i to sell secredited is in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | amount pu | f investor and irchased in State C-Item 2) | | under Sti (if yes, explan waiver | ate ULOE |
| State | Yes | No | Enter Security Name Here | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | | ************************************** | | | | diamental and the second secon | | | |
| PR | | | | | | | | | |